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- and -

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Counsel to the Debtors and
Debtors in Possession

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
RICHMOND DIVISION

- - - - - x
In re: : Chapter 11
:
CIRCUIT CITY STORES, INC., : Case No. 08-35653 (KRH)
et al., :
:
Debtors. : Jointly Administered
- - - - - x

**ORDER ON DEBTORS' SIXTY-FIFTH OMNIBUS OBJECTION
TO CLAIMS (RECLASSIFICATION OF CERTAIN CLAIMS
FILED BY EQUITY HOLDERS TO INTERESTS)**

THIS MATTER having come before the Court on the
Debtors' Sixty-Fifth Omnibus Objection to Claims
(Reclassification of Certain Claims Filed by Equity Holders
to Interests) (the "Objection"), which requested, among
other things, that the claims specifically identified on

Exhibit C attached to the Objection be modified and/or reclassified for those reasons set forth in the Objection; and it appearing that due and proper notice and service of the Objection as set forth therein was good and sufficient and that no other further notice or service of the Objection need be given; and it further appearing that one response was timely filed by a Claimant being affected by this Order; and it appearing that the relief requested on the Objection is in the best interest of the Debtors, their estates and creditors and other parties-in-interest; and after due deliberation thereon good and sufficient cause exists for the granting of the relief as set forth herein,

IT IS HEREBY ORDERED ADJUDGED AND DECREED THAT:

1. The Objection is GRANTED.
2. The Claims identified on Exhibit A as attached hereto and incorporated herein are reclassified and/or modified as set forth on Exhibit A for all purposes in these bankruptcy cases.
3. A hearing on the merits as to the Objection to the Claim identified on Exhibit B as attached hereto and incorporated herein will be held on March 8, 2010 at 11:00 a.m. (Eastern). Separate notice of this hearing was previously provided to the Claimant identified on Exhibit B

(Docket No. 6548).

4. The Debtors' rights to object to any claim, including (without limitation) the claims included in the Objection, on any grounds that applicable law permits are not waived and are expressly reserved.

5. The Debtors shall serve a copy of this Order on the claimants included on the exhibits to this Order on or before five (5) business days from the entry of this Order.

6. This Court shall retain jurisdiction to hear and determine all matters arising from or relating to this Order.

Dated: Richmond, Virginia
_____, 2010

HONORABLE KEVIN R. HUENNEKENS
UNITED STATES BANKRUPTCY JUDGE

WE ASK FOR THIS:

Gregg M. Galardi, Esq.
Ian S. Fredericks, Esq.
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155 North Wacker Drive
Chicago, Illinois 60606-1720
(312) 407-0700

- and -

/s/ Douglas M. Foley_____
Dion W. Hayes (VSB No. 34304)
Douglas M. Foley (VSB No. 34364)
MCGUIREWOODS LLP
One James Center
901 E. Cary Street
Richmond, Virginia 23219
(804) 775-1000

Counsel to the Debtors
and Debtors in Possession

CERTIFICATION OF ENDORSEMENT UNDER LOCAL RULE 9022-1(C)

Pursuant to Local Bankruptcy Rule 9022-1(C), I hereby certify that the foregoing proposed order has been endorsed by or served upon all necessary parties.

/s/ Douglas M. Foley_____
Douglas M. Foley

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EXHIBIT A

[illegible]

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7521 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: BISHOP, BENJAMIN T 1712 POINT OF ROCKS RD CHESTER, VA 23836	Claim Holder Name and Address BISHOP, BENJAMIN T 1712 POINT OF ROCKS RD CHESTER, VA 23836 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total: \$0.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> 08-35653 \$0.00
Claim: 2812 Date Filed: 01/06/2009 Docketed Total: \$6,155.00 Filing Creditor Name and Address: BOWMAN, DENNIS 3732 GLADES END LANE RICHMOND, VA 23233	Claim Holder Name and Address BOWMAN, DENNIS 3732 GLADES END LANE RICHMOND, VA 23233 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$6,155.00	<div>Modified Total: \$6,155.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> 08-35653 \$6,155.00
Claim: 6576 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: BURCHFIELD, FRANKLIN J 6028 MAYBROOK WAY GLEN ALLEN, VA 23060	Claim Holder Name and Address BURCHFIELD, FRANKLIN J 6028 MAYBROOK WAY GLEN ALLEN, VA 23060 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total: \$0.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> 08-35653 \$0.00
Claim: 4594 Date Filed: 01/20/2009 Docketed Total: \$1,639.90 Filing Creditor Name and Address: CAROLYN WELCOME 2015 MILL CREEK DR ARLINGTON, TX 76010	Claim Holder Name and Address WELCOME, CAROLYN 2015 MILL CREEK DR ARLINGTON, TX 76010 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$1,639.90	<div>Modified Total: \$1,639.90</div> <div> <div>Case Number</div> <div>Interest</div> </div> 08-35653 \$1,639.90

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 13750 Date Filed: 06/22/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: CHRISTOPHER MEANS 460 WILDER ST AURORA, IL 60506	Claim Holder Name and Address CHRISTOPHER MEANS 460 WILDER ST AURORA, IL 60506 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6832 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: CLARKE, JESSICA S 9234 FAIR HILL COURT MECHANICSVILLE, VA 23116-3156	Claim Holder Name and Address CLARKE, JESSICA S 9234 FAIR HILL COURT MECHANICSVILLE, VA 23116-3156 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6833 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: CLARKE, JESSICA S 9234 FAIR HILL COURT MECHANICSVILLE, VA 23116-3156	Claim Holder Name and Address CLARKE, JESSICA S 9234 FAIR HILL COURT MECHANICSVILLE, VA 23116-3156 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6057 Date Filed: 01/26/2009 Docketed Total: \$123.82 Filing Creditor Name and Address: CLEVINGER, DAVID W 2000 GINGHAM COURT MARION, IL 62959	Claim Holder Name and Address CLEVINGER, DAVID W 2000 GINGHAM COURT MARION, IL 62959 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$123.82	<div>Modified Total:</div> <div>\$123.82</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$123.82</div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7635 Date Filed: 01/28/2009 Docketed Total: \$760.00 Filing Creditor Name and Address: CONSTANCE G KOVAN 32451 MEDITERRANEAN DR DANA POINT, CA 92629	Claim Holder Name and Address KOVAN, CONSTANCE G 32451 MEDITERRANEAN DR DANA POINT, CA 92629 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>\$760.00</div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> Modified Total: \$760.00 <div> <div>Case Number</div> <div></div> <div></div> <div></div> <div></div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>Interest</div> </div> \$760.00
Claim: 9494 Date Filed: 01/30/2009 Docketed Total: \$77.39 Filing Creditor Name and Address: CROUSE, ANGELA C 14960 LEBANON RD SPRING GROVE, VA 23881	Claim Holder Name and Address CROUSE, ANGELA C 14960 LEBANON RD SPRING GROVE, VA 23881 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>\$77.39</div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> Modified Total: \$77.39 <div> <div>Case Number</div> <div></div> <div></div> <div></div> <div></div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>Interest</div> </div> \$77.39
Claim: 7020 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: CURRIER, MICHAEL J 16339 COPPERTREE DR MONTPELIER, VA 23192	Claim Holder Name and Address CURRIER, MICHAEL J 16339 COPPERTREE DR MONTPELIER, VA 23192 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>UNL</div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> Modified Total: \$0.00 <div> <div>Case Number</div> <div></div> <div></div> <div></div> <div></div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>Interest</div> </div> \$0.00
Claim: 7023 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: CURRIER, MICHAEL J 16339 COPPERTREE DR MONTPELIER, VA 23192	Claim Holder Name and Address CURRIER, MICHAEL J 16339 COPPERTREE DR MONTPELIER, VA 23192 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>UNL</div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> Modified Total: \$0.00 <div> <div>Case Number</div> <div></div> <div></div> <div></div> <div></div> </div> 08-35653 <div> <div></div> <div></div> <div></div> <div></div> <div>Interest</div> </div> \$0.00

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7136 Date Filed: 01/28/2009 Docketed Total: \$1,420.96 Filing Creditor Name and Address: CURTIS EUGENE HENSON 3430 ELLEDGE MILL RD N WILKESBORO, NC 28659	Claim Holder Name and Address HENSON, CURTIS EUGENE 3430 ELLEDGE MILL RD N WILKESBORO, NC 28659 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> <div> <div>08-35653</div> <div></div> <div></div> <div></div> <div>\$1,420.96</div> </div>	<div>Modified Total: \$1,420.96</div> <div> <div>Case Number</div> <div>Interest</div> </div> <div> <div>08-35653</div> <div>\$1,420.96</div> </div>
Claim: 13269 Date Filed: 06/04/2009 Docketed Total: \$140.00 Filing Creditor Name and Address: DAVE BARTIK 8101 PERS DR NO 1804 WOODRIDGE, IL 60517	Claim Holder Name and Address DAVE BARTIK 8101 PERS DR NO 1804 WOODRIDGE, IL 60517 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> <div> <div>08-35653</div> <div>\$140.00</div> <div></div> <div></div> <div></div> </div>	<div>Modified Total: \$140.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> <div> <div>08-35653</div> <div>\$140.00</div> </div>
Claim: 9093 Date Filed: 01/23/2009 Docketed Total: \$1,500.00 Filing Creditor Name and Address: DAVIS, TONY V 11220 BUCKHEAD CT MIDLOTHIAN, VA 23113	Claim Holder Name and Address DAVIS, TONY V 11220 BUCKHEAD CT MIDLOTHIAN, VA 23113 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> <div> <div>08-35653</div> <div></div> <div></div> <div></div> <div>\$1,500.00</div> </div>	<div>Modified Total: \$1,500.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> <div> <div>08-35653</div> <div>\$1,500.00</div> </div>
Claim: 14339 Date Filed: 06/30/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: DEASON, STEPHEN N 2701 E BRIGSTOCK RD MIDLOTHIAN, VA 23113	Claim Holder Name and Address DEASON, STEPHEN N 2701 E BRIGSTOCK RD MIDLOTHIAN, VA 23113 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> <div> <div>08-35653</div> <div>UNL</div> <div></div> <div></div> <div></div> </div>	<div>Modified Total: \$0.00</div> <div> <div>Case Number</div> <div>Interest</div> </div> <div> <div>08-35653</div> <div>\$0.00</div> </div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
<p>Claim: 12188 Date Filed: 04/14/2009 Docketed Total: \$308.50 Filing Creditor Name and Address: DENTAL SERVICE CO INC 135 ORCHARD BEACH RD NORTH EAST, PA 16428</p>	<p>Claim Holder Name and Address DENTAL SERVICE CO INC 135 ORCHARD BEACH RD NORTH EAST, PA 16428</p> <p>Docketed Total: UNL</p> <p><u>Case Number</u> <u>Administrative</u> <u>Secured</u> <u>Priority</u> <u>Unsecured</u> 08-35653 \$308.50</p>	<p>Modified Total: \$308.50</p> <p><u>Case Number</u> <u>Interest</u> 08-35653 \$308.50</p>
<p>Claim: 11660 Date Filed: 03/03/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: DENTON, DIANA INDIVIDUAL OWNERSHIP & JOINT WITH RONALD DENTON 6102 BREMO RD RICHMOND, VA 23226</p>	<p>Claim Holder Name and Address DENTON, DIANA INDIVIDUAL OWNERSHIP & JOINT WITH RONALD DENTON 6102 BREMO RD RICHMOND, VA 23226</p> <p>Docketed Total: UNL</p> <p><u>Case Number</u> <u>Administrative</u> <u>Secured</u> <u>Priority</u> <u>Unsecured</u> 08-35653 UNL</p>	<p>Modified Total: \$0.00</p> <p><u>Case Number</u> <u>Interest</u> 08-35653 \$0.00</p>
<p>Claim: 13956 Date Filed: 06/30/2009 Docketed Total: \$3,544.00 Filing Creditor Name and Address: EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</p>	<p>Claim Holder Name and Address EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</p> <p>Docketed Total: UNL</p> <p><u>Case Number</u> <u>Administrative</u> <u>Secured</u> <u>Priority</u> <u>Unsecured</u> 08-35653 \$3,544.00</p>	<p>Modified Total: \$3,544.00</p> <p><u>Case Number</u> <u>Interest</u> 08-35653 \$3,544.00</p>
<p>Claim: 13995 Date Filed: 06/30/2009 Docketed Total: \$21,697.50 Filing Creditor Name and Address: EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</p>	<p>Claim Holder Name and Address EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</p> <p>Docketed Total: UNL</p> <p><u>Case Number</u> <u>Administrative</u> <u>Secured</u> <u>Priority</u> <u>Unsecured</u> 08-35653 \$21,697.50</p>	<p>Modified Total: \$21,697.50</p> <p><u>Case Number</u> <u>Interest</u> 08-35653 \$21,697.50</p>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
<div>Claim: 14099</div> <div>Date Filed: 06/30/2009</div> <div>Docketed Total: \$11,524.00</div> <div>Filing Creditor Name and Address: EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</div>	<div>Claim Holder Name and Address</div> <div>EASTWOOD, VICTORIA L 3919 SOUTHWINDS PL GLEN ALLEN, VA 23059</div> <div>Docketed Total: UNL</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Administrative</u></div><div>\$11,524.00</div></div><div><div><u>Secured</u></div></div><div><div><u>Priority</u></div></div><div><div><u>Unsecured</u></div></div></div>	<div>Modified Total: \$11,524.00</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Interest</u></div><div>\$11,524.00</div></div></div>
<div>Claim: 13526</div> <div>Date Filed: 06/19/2009</div> <div>Docketed Total: \$0.00</div> <div>Filing Creditor Name and Address: ELIZABETH R WARREN 1824 HANOVER AVE RICHMOND, VA 23220</div>	<div>Claim Holder Name and Address</div> <div>ELIZABETH R WARREN 1824 HANOVER AVE RICHMOND, VA 23220</div> <div>Docketed Total: UNL</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Administrative</u></div><div>UNL</div></div><div><div><u>Secured</u></div></div><div><div><u>Priority</u></div></div><div><div><u>Unsecured</u></div></div></div>	<div>Modified Total: \$0.00</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Interest</u></div><div>\$0.00</div></div></div>
<div>Claim: 13532</div> <div>Date Filed: 06/19/2009</div> <div>Docketed Total: \$0.00</div> <div>Filing Creditor Name and Address: ELIZABETH R WARREN 1824 HANOVER AVE RICHMOND, VA 23220</div>	<div>Claim Holder Name and Address</div> <div>ELIZABETH R WARREN 1824 HANOVER AVE RICHMOND, VA 23220</div> <div>Docketed Total: UNL</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Administrative</u></div><div>UNL</div></div><div><div><u>Secured</u></div></div><div><div><u>Priority</u></div></div><div><div><u>Unsecured</u></div></div></div>	<div>Modified Total: \$0.00</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Interest</u></div><div>\$0.00</div></div></div>
<div>Claim: 12187</div> <div>Date Filed: 04/14/2009</div> <div>Docketed Total: \$1,784.43</div> <div>Filing Creditor Name and Address: FARRINGTON, LAWRENCE R 28512 CHIANTI TERR BONITA SPRINGS, FL 34135</div>	<div>Claim Holder Name and Address</div> <div>FARRINGTON, LAWRENCE R 28512 CHIANTI TERR BONITA SPRINGS, FL 34135</div> <div>Docketed Total: UNL</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Administrative</u></div><div>\$1,784.43</div></div><div><div><u>Secured</u></div></div><div><div><u>Priority</u></div></div><div><div><u>Unsecured</u></div></div></div>	<div>Modified Total: \$1,784.43</div> <div><div><div><u>Case Number</u></div><div>08-35653</div></div><div><div><u>Interest</u></div><div>\$1,784.43</div></div></div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7101 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FAY LAWRENCE W 2500 MAPLE HALL CT MIDLOTHIAN, VA 23113	Claim Holder Name and Address FAY, LAWRENCE W 2500 MAPLE HALL CT MIDLOTHIAN, VA 23113 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6677 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FREEMAN JAMES M 10307 SAGEGLOW HOUSTON, TX 77089	Claim Holder Name and Address FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6680 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FREEMAN JAMES M 10307 SAGEGLOW HOUSTON, TX 77089	Claim Holder Name and Address FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 6679 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089	Claim Holder Name and Address FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 6685 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089	Claim Holder Name and Address FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 6687 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089	Claim Holder Name and Address FREEMAN, JAMES M 10307 SAGEGLOW HOUSTON, TX 77089 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 9218 Date Filed: 01/30/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: GILMOUR, CATHERINE M 10801 SNOWMASS CT GLEN ALLEN, VA 23060	Claim Holder Name and Address GILMOUR, CATHERINE M 10801 SNOWMASS CT GLEN ALLEN, VA 23060 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 5481 Date Filed: 01/26/2009 Docketed Total: \$9,577.55 Filing Creditor Name and Address: GLOSKEY, MARIA M 900 MICKLEY RDAPT T1 3 WHITEHALL, PA 18052	Claim Holder Name and Address GLOSKEY, MARIA M 900 MICKLEY RDAPT T1 3 WHITEHALL, PA 18052 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>\$9,577.55</div>	<div>Modified Total:</div> <div>\$9,577.55</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$9,577.55

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 6865 Date Filed: 01/27/2009 Docketed Total: \$31,013.25 Filing Creditor Name and Address: JACOB M ESHLER 6310 BOUNDARY RUN DR MECHANICSVILLE, VA 23111	Claim Holder Name and Address ESHLER, JACOB M 6310 BOUNDARY RUN DR MECHANICSVILLE, VA 23111 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>\$31,013.25</div>	<div>Modified Total:</div> <div>\$31,013.25</div> <div>Case Number</div> <div>Interest</div> 08-35653 <div>\$31,013.25</div>
Claim: 6458 Date Filed: 01/26/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: JOLY, RUSSELL N 5318 WOODSTONE COURT LOUISA, VA 23093	Claim Holder Name and Address JOLY, RUSSELL N 5318 WOODSTONE COURT LOUISA, VA 23093 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 <div>\$0.00</div>
Claim: 3811 Date Filed: 01/15/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: JOYCE M DAVIS 11307 SW 167 ST MIAMI, FL 33157	Claim Holder Name and Address DAVIS, JOYCE M 11307 SW 167 ST MIAMI, FL 33157 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 <div>\$0.00</div>
Claim: 3931 Date Filed: 01/15/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: JOYCE M DAVIS 11307 SW 167 ST MIAMI, FL 33157	Claim Holder Name and Address DAVIS, JOYCE M 11307 SW 167 ST MIAMI, FL 33157 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 <div>\$0.00</div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 3944 Date Filed: 01/15/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: JUNE B CADE 725 E IMPERIAL HWY LOS ANGELES, CA 90059	Claim Holder Name and Address CADE, JUNE B 725 E IMPERIAL HWY LOS ANGELES, CA 90059 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 6538 Date Filed: 01/23/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: LANE, DARICK 3413 ANDOVER HILLS PL RICHMOND, VA 23294	Claim Holder Name and Address LANE, DARICK 3413 ANDOVER HILLS PL RICHMOND, VA 23294 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 8007 Date Filed: 01/29/2009 Docketed Total: \$138.00 Filing Creditor Name and Address: LATTA, DONNA 5504 COPPERPENNY DR CHESTERFIELD, VA 23832	Claim Holder Name and Address LATTA, DONNA 5504 COPPERPENNY DR CHESTERFIELD, VA 23832 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>\$138.00</div>	<div>Modified Total:</div> <div>\$138.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$138.00
Claim: 8779 Date Filed: 01/30/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: LUBARY, JAMES 3161 DRUID LN LOS ALAMITOS, CA 90720	Claim Holder Name and Address LUBARY, JAMES 3161 DRUID LN LOS ALAMITOS, CA 90720 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35654 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35654 \$0.00

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 8780 Date Filed: 01/30/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: LUBARY, JAMES 3161 DRUID LN LOS ALAMITOS, CA 90720	Claim Holder Name and Address LUBARY, JAMES 3161 DRUID LN LOS ALAMITOS, CA 90720 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35654 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35654 \$0.00
Claim: 13661 Date Filed: 06/25/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: LYNN SPINDLER 815 2ND ST PEPIN, WI 54759	Claim Holder Name and Address LYNN SPINDLER 815 2ND ST PEPIN, WI 54759 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 7041 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: MARK S STINDE 2501 E FRANKLIN ST NO 2 RICHMOND, VA 23223	Claim Holder Name and Address STINDE, MARK S 2501 E FRANKLIN ST NO 2 RICHMOND, VA 23223 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 3584 Date Filed: 01/14/2009 Docketed Total: \$53.05 Filing Creditor Name and Address: MARTINEZ, ALVARO 2112 S BROADWAY SANTA ANA, CA 92707	Claim Holder Name and Address MARTINEZ, ALVARO 2112 S BROADWAY SANTA ANA, CA 92707 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$53.05	<div>Modified Total:</div> <div>\$53.05</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$53.05

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 8494 Date Filed: 01/29/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: MCGINNIS, HOLLY C 11712 COOLWIND LANE RICHMOND, VA 23233	Claim Holder Name and Address MCGINNIS, HOLLY C 11712 COOLWIND LANE RICHMOND, VA 23233 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 8498 Date Filed: 01/29/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: MCGINNIS, HOLLY C 11712 COOLWIND LN RICHMOND, VA 23233	Claim Holder Name and Address MCGINNIS, HOLLY C 11712 COOLWIND LN RICHMOND, VA 23233 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 8508 Date Filed: 01/29/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: MCGINNIS, ROBERT C 11712 COOL WIND LN RICHMOND, VA 23233	Claim Holder Name and Address MCGINNIS, ROBERT C 11712 COOL WIND LN RICHMOND, VA 23233 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$0.00
Claim: 9126 Date Filed: 01/30/2009 Docketed Total: \$1,809.83 Filing Creditor Name and Address: NICHOLAS CALABRESE 519 HARRIS RD RICHMOND HTS, OH 44143	Claim Holder Name and Address CALABRESE, NICHOLAS 519 HARRIS RD RICHMOND HTS, OH 44143 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$1,809.83	<div>Modified Total:</div> <div>\$1,809.83</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$1,809.83

* "UNL" denotes an unliquidated claim.

EXHIBIT A

[illegible]

* "UNL" denotes an unliquidated claim.

EXHIBIT A

[illegible]

* "UNL" denotes an unliquidated claim.

EXHIBIT A

[illegible]

* "UNL" denotes an unliquidated claim.

EXHIBIT A

[illegible]

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7351 Date Filed: 01/28/2009 Docketed Total: \$63,000.00 Filing Creditor Name and Address: SIFFORD, MICHELLE A 2917 NORTHLAKE DR RICHMOND, VA 23233	Claim Holder Name and Address SIFFORD, MICHELLE A 2917 NORTHLAKE DR RICHMOND, VA 23233 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 <div>\$63,000.00</div>	<div>Modified Total:</div> <div>\$63,000.00</div> <div>Case Number</div> <div>Interest</div> 08-35653 \$63,000.00
Claim: 7043 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241	Claim Holder Name and Address SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35654 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35654 \$0.00
Claim: 7047 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241	Claim Holder Name and Address SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35654 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35654 \$0.00
Claim: 7057 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241	Claim Holder Name and Address SINDELAR, ERIC C 2696 E 132 PL THORNTON, CO 80241 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35654 <div>UNL</div>	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>Interest</div> 08-35654 \$0.00

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED
Claim: 7037 Date Filed: 01/28/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: STINDE, MARK S 2501 E FRANKLIN ST NO 2 RICHMOND, VA 23223	Claim Holder Name and Address STINDE, MARK S 2501 E FRANKLIN ST NO 2 RICHMOND, VA 23223 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 8414 Date Filed: 01/29/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: STOCKETT, LES K 40 JADE LANE LOPATCONG, NJ 08865	Claim Holder Name and Address STOCKETT, LES K 40 JADE LANE LOPATCONG, NJ 08865 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>
Claim: 8474 Date Filed: 01/29/2009 Docketed Total: \$6,165.07 Filing Creditor Name and Address: WEISS, STEVEN 100 NEW CASTLE LOOP GOOSE CREEK, SC 29445	Claim Holder Name and Address WEISS, STEVEN 100 NEW CASTLE LOOP GOOSE CREEK, SC 29445 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 \$6,165.07	<div>Modified Total:</div> <div>\$6,165.07</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$6,165.07</div>
Claim: 8199 Date Filed: 01/29/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: WOODS TERRELL A 5724 SULLIVAN POINT DR POWDER SPRINGS, GA 30127	Claim Holder Name and Address WOODS, TERRELL A 5724 SULLIVAN POINT DR POWDER SPRINGS, GA 30127 <div> <div>Case Number</div> <div>Administrative</div> <div>Secured</div> <div>Priority</div> <div>Unsecured</div> </div> 08-35653 UNL	<div>Modified Total:</div> <div>\$0.00</div> <div>Case Number</div> <div>08-35653</div> <div>Interest</div> <div>\$0.00</div>

* "UNL" denotes an unliquidated claim.

EXHIBIT A

CLAIM TO BE MODIFIED	CLAIM AS DOCKETED*	CLAIM AS MODIFIED														
Claim: 6487 Date Filed: 01/27/2009 Docketed Total: \$0.00 Filing Creditor Name and Address: WOOLDRIDGE, WALTER L 10371 COHOKE PATHWAY ASHLAND, VA 23005-3392	Claim Holder Name and Address WOOLDRIDGE, WALTER L 10371 COHOKE PATHWAY ASHLAND, VA 23005-3392 <table><tr><td><u>Case Number</u></td><td><u>Administrative</u></td><td><u>Secured</u></td><td><u>Priority</u></td><td><u>Unsecured</u></td></tr><tr><td>08-35653</td><td></td><td></td><td></td><td>UNL</td></tr></table>	<u>Case Number</u>	<u>Administrative</u>	<u>Secured</u>	<u>Priority</u>	<u>Unsecured</u>	08-35653				UNL	 <table><tr><td><u>Case Number</u></td><td><u>Interest</u></td></tr><tr><td>08-35653</td><td>\$0.00</td></tr></table>	<u>Case Number</u>	<u>Interest</u>	08-35653	\$0.00
<u>Case Number</u>	<u>Administrative</u>	<u>Secured</u>	<u>Priority</u>	<u>Unsecured</u>												
08-35653				UNL												
<u>Case Number</u>	<u>Interest</u>															
08-35653	\$0.00															
Claim: 7016 Date Filed: 01/28/2009 Docketed Total: \$95.00 Filing Creditor Name and Address: YOGESH S KULKARNI 201 RAILROAD AVE APT 229 E RUTHERFORD, NJ 07073	Claim Holder Name and Address KULKARNI, YOGESH S 201 RAILROAD AVE APT 229 E RUTHERFORD, NJ 07073 <table><tr><td><u>Case Number</u></td><td><u>Administrative</u></td><td><u>Secured</u></td><td><u>Priority</u></td><td><u>Unsecured</u></td></tr><tr><td>08-35653</td><td></td><td></td><td></td><td>\$95.00</td></tr></table>	<u>Case Number</u>	<u>Administrative</u>	<u>Secured</u>	<u>Priority</u>	<u>Unsecured</u>	08-35653				\$95.00	 <table><tr><td><u>Case Number</u></td><td><u>Interest</u></td></tr><tr><td>08-35653</td><td>\$95.00</td></tr></table>	<u>Case Number</u>	<u>Interest</u>	08-35653	\$95.00
<u>Case Number</u>	<u>Administrative</u>	<u>Secured</u>	<u>Priority</u>	<u>Unsecured</u>												
08-35653				\$95.00												
<u>Case Number</u>	<u>Interest</u>															
08-35653	\$95.00															
		Total Claims To Be Modified: 78 Total Amount As Docketed: \$335,655.45 Total Amount As Modified: \$335,655.45														

* "UNL" denotes an unliquidated claim.

EXHIBIT B

CREDITOR'S NAME AND ADDRESS	CLAIM NUMBER	ASSERTED CLAIM AMOUNT *	DATE FILED	DOCKETED DEBTOR
LOUIS A LUCHAK LOUIS A LUCHAK AND DOLORES I LUCHAK 4219 AVE J SANTA FE, TX 77510	13259	Secured: Priority: Administrative \$109.99 503(b)(9): Unsecured: Reclamation: Total: \$109.99	06/02/2009	CIRCUIT CITY STORES, INC. (08-35653)

Total: 1 \$109.99

* "UNL" denotes an unliquidated claim.